



## **HNVF APPLICANTS**

### **PLEASE NOTE**

**No 24-hour grace period  
will be provided to submit  
late components of the  
application.**

**Applications that are  
not received or are incomplete  
as of**

**Monday, December 6, 2004,  
5:00 PM**

**will not be accepted.**

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## **2005-2006 Grant Proposal**

### **Healthy Neighborhoods Venture Fund (HNVF)**

**Release Date:** Friday, October 29, 2004

**Proposals Due:** Monday, December 6, 2004, 5:00 P.M.  
Late, e-mailed, postmarked, faxed, or  
incomplete applications will not be accepted.

**Submit proposals at the following location:**

Parks, Recreation, and Neighborhood Services Dept.  
Administrative Services Division, Grants Unit  
4 North Second Street, Suite 600  
San José, CA 95113  
408-277-3707 phone

To obtain an electronic copy of this application packet, please go to the following:

<http://www.sanjoseca.gov/prns/hnvf.htm>

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## I. APPLICATION TIMELINE



**PROPOSALS ARE DUE at 5:00 p.m. on Monday, December 6, 2004. Proposals received after 5:00 p.m. will not be accepted. There will be no grace period during which late components of the application will be accepted. Faxed, e-mailed, postmarked, or incomplete proposals will not be accepted.**

### Estimated Timeline

Activity	Date/Time	Location
Application Released	Friday, October 29, 2004	<a href="http://www.sanjoseca.gov/prns/hnvf.htm">http://www.sanjoseca.gov/prns/hnvf.htm</a> Department of Parks, Recreation & Neighborhood Services (PRNS) 4 North Second Street, Suite 600 San José, CA 95113
Technical Assistance by HNVF Analysts	Tuesday, November 2, 2004 - Friday, December 3, 2004	Phone (277-3707) or e-mail (City's e-mail system uses staff's firstname.lastname@sanjoseca.gov)
WORKSHOP 1 Eligibility and Application Instructions	Tuesday, November 9, 2004 9:00 a.m. – 12:00 p.m.	Large Conference Room 4 N. Second Street, Suite 600 San José, CA 95113
WORKSHOP 2 Program Outcomes	Wednesday, November 10, 2004 9:00 a.m. – 12:00 p.m.	Large Conference Room 4 N. Second Street, Suite 600 San José, CA 95113
Last Day for Draft Application Review	Tuesday, November 30, 2004	
<b>Deadline for Submission of Applications</b>	<b>Monday, December 6, 2004 5:00 p.m.</b>	<b>Large Conference Room 4 N. Second Street, Suite 600 San José, CA 95113</b>
Committee Working Meeting: Application Discussion Meeting and 2 <sup>nd</sup> Quarter Monitoring Report	Wednesday, March 16, 2005 4:00 p.m. - 7:30 p.m.	Location TBD
Administration Funding Recommendation and Committee Working Meeting	Wednesday, April 6, 2005 4:00 p.m. - 9:00 p.m.	Location TBD
City Approves Budget	June 21, 2005	City Hall
Committee Meeting: Proposal Process Debriefing	Wednesday, June 29, 2005 4:00 p.m. - 6:00 p.m.	Location TBD

## II. HNVF BACKGROUND AND GOALS

The City of San José anticipates receiving \$250 million over a 25-year period from the national settlement with tobacco companies. In March 2000, the City Council approved the Mayor's recommendation to use these funds for investing in "healthy neighborhoods for future generations," hereafter referred to as the Healthy Neighborhoods Venture Fund (HNVF). The City Council directed Administration to distribute funds through a public competitive process using the following allocation categories:

- 1) Tobacco-Free Community/Health
- 2) Education/Health
- 3) Senior Services/Health

An Advisory Committee made up of three (3) Council members and four (4) members of the community was formed to assist in the review of applications for the Healthy Neighborhoods Program and make annual recommendations to the City Council for the expenditure of the funds. HNVF funding was first awarded in January 2001.

The HNVF Program utilizes a targeted approach to funding projects. Projects that align with and contribute toward achieving goals outlined in the strategic work plans associated with adopted City of San José Master Plans in each of the three funding categories are encouraged and given funding priority (e.g., the Youth Services Master Plan, *A Blueprint for Bridging the Digital Divide*, San José's Early Care and Education Strategic Plan, *Investing in the Future*, City of San José Aging Services Master Plan). Linkages to other locally recognized strategic work plans and/or master plans are also encouraged. The City's Strategic Plans can be reviewed in the HNVF office at PRNS.

### ***AMOUNT AVAILABLE FOR ALLOCATION***

The City receives approximately \$10 million in HNVF funds each year. From this amount, the City Council has approved funding priority for two projects as well as HNVF program administration for the 2005-2006 fiscal year. These projects are:

1. The Homework Centers project
2. Children's Health Initiative project

In the 2004-2005 fiscal year, funds allocated to these projects and HNVF program administration totaled approximately \$5 million. Although funding priority has been awarded to these projects, 2005-2006 fiscal year funding amounts for these projects have not been set. Funding amounts will be decided in conjunction with the City's budget decisions. The remaining amount available for allocation in the 2005-2006 fiscal year is dependent on these budget decisions.

Funds available will be allocated in accordance with the allocation guideline adopted by the City Council. Twenty-five percent (25%) of available funds will be allocated to projects that address needs in the Tobacco-Free Community/Health category, twenty-five percent (25%) will be allocated to projects that address needs in the Senior Services/Health category, and fifty percent (50%) to projects that address needs in the Education/Health category. **Applicants must select a primary category for their application.**

Applicants are encouraged to be creative in developing and implementing strategies to address the issues facing neighborhoods in San José. An Innovation Fund, which is the higher of \$500,000 or 5% of available funds, has been set aside for allocation to “innovative” projects. An innovative project is defined as a project that employs a new, untried service delivery method for a project that aligns with the HNVF goals, strategic impact areas, and long-term outcomes for the impact areas. Innovation funds are also designed to assist non-profit agencies in developing their capacity to provide services that are unique.

Should the Innovation Fund not be depleted, the remaining amount will be redistributed to the three funding categories.

#### ***ANTI-TOBACCO COMPONENT REQUIREMENT***

To be considered for funding, all proposed projects must include an anti-tobacco component. This applies to applications in all three funding categories. Acceptable anti-tobacco projects are those which have a significant impact on the target population. Distribution of information (such as handing out pamphlets, displaying posters, or hosting lectures) is not a sufficient anti-tobacco activity. Anti-tobacco activities should be hands-on and should have a direct impact on participants.

#### ***HNVF GOALS, IMPACT AREAS, AND LONG-TERM OUTCOMES***

The HNVF goals, impact areas, and long-term outcomes are listed on the following page. Proposed projects must address one of the three impact areas and align with the HNVF goal and long-term outcomes for that goal.

## ***HNVF GOALS, IMPACT AREAS AND LONG-TERM OUTCOMES***

HNVF Goal	Impact Areas	Long-term Outcomes
<i>To decrease the use of tobacco products and related health problems associated with tobacco use for San José residents, contributing to improved overall health for the City's population.</i>	<p><b>TOBACCO-FREE COMMUNITY</b> (San José Tobacco-Free Collaborative)</p> <p>Stop tobacco addiction and reduce the impact of tobacco use in San José through prevention and education, tobacco cessation, and counter-marketing.</p>	<ol style="list-style-type: none"> <li>1. San José will be a tobacco-free community.</li> </ol>
<i>To improve the academic success of San José students through programs that address unmet health care needs and provide for healthy developmental age-appropriate activities.</i>	<p><b>EDUCATION</b> (Blueprint)</p> <p>Provide for safe opportunities for youth to be successful and productive.</p>	<ol style="list-style-type: none"> <li>1. Young children will enter kindergarten ready to succeed academically.</li> <li>2. Elementary/middle school children will be educationally at or above grade level and will choose healthy behaviors.</li> <li>3. Teenagers have a sense of purpose and graduate from high school with a plan for higher education or career preparation.</li> </ol>
<i>To improve the quality of life for seniors by increasing subsidized programs and services, providing for basic health and nutritional needs, and promoting independent living through social and recreational activities.</i>	<p><b>SENIOR SERVICES</b> (Aging Master Plan)</p> <p>Foster the independence of older persons in San José and assist them in meeting their basic life needs through planning, advocacy, funding, and/or directly providing services to this growing, diverse population.</p>	<ol style="list-style-type: none"> <li>1. Every older adult in San José receives an adequate daily diet.</li> <li>2. Older persons in San José maintain optimum physical and mental health, and have full access to affordable preventive and treatment health services.</li> <li>3. Older adults needing homemaker, attendant, respite and/or nursing care receive appropriate types and levels of affordable services in their homes.</li> <li>4. Older adults in San José have full protection from physical, psychological, and/or financial abuse and neglect.</li> </ol>
<b>INNOVATION</b>	<p>Promotes one of the HNVF funding categories through a new, unique, or untried approach to cultivating good health, safe communities, and enriching the lives of San José residents.</p>	

### III. NEW FOR CYCLE 6 (2005-2006)

The following items are new to this year's HNVF application:

- **There will be no 24-hour grace period during which late components of the application will be accepted.** Applications that are not received or are incomplete as of December 6, 2004 at 5:00 P.M. will not be accepted. (see page 1)
- There is a minimum leverage (cash match) requirement of 20% of the total project budget. Applications not meeting this requirement will not be considered for funding. (see page 16)
- The cash value of donated rent or utilities may be included in the applicant's cash match (leverage). (see page 27)
- Only public service applications will be accepted during Cycle 6. Applications proposing physical improvement projects will not be accepted this year.
- Proposed projects applying under the Education/Health category must support an increase in and measure one or more of the eight (8) Developmental Assets listed in this application. (see page 9)
- The Work Plan (Form D) has been modified so that it can be used in the application as well as the contract and activity reports for funded agencies. (see page 33)
- The list of eligible activities for the Senior Services category has been expanded to include Affordable Housing and Transportation Services. (see page 11)
- The minimum award amount is \$25,000.
- The Budget (Form E) has been modified to include a breakdown of cost per activity. (see page 34)



#### IV. ELIGIBILITY CRITERIA

To be eligible to apply for funds under the HNVF grant program, applicants and proposed projects must meet all the ELIGIBILITY CRITERIA for the HNVF program at the time of proposal submittal. **Applicants or proposed projects that do not meet all eligibility criteria will not be considered for funding, and no evaluation of the proposal will be made.** Proposals submitted must be responsive to all proposal instructions and requirements.

Eligible Applicant	<p>Applicants must be one of the following entities:</p> <ul style="list-style-type: none"> <li>• A government agency</li> <li>• A private non-profit agency with 501(c)(3) status. Eligibility requirements specific to non-profit agencies are listed on page 6.</li> <li>• A private for-profit entity with proof of status and license to do business in San José. <b>A for-profit entity is strongly encouraged to collaborate and apply with an eligible non-profit organization or a public entity.</b></li> <li>• Any <b>recognizable association</b> of people <b>with a Fiscal Agent</b> who agrees to abide by the City's grant agreement on behalf of the association. The Fiscal Agent will be the legal representative of the project and <b>may only be used once</b>. Funds approved for the project will be awarded to the Fiscal Agent and the contract for award of grant funds will be made between the City and the Fiscal Agent. The Fiscal Agent must sign <b>Form I</b> in this packet, which shows agreement to apply for funding on behalf of the association and to comply with the responsibilities of a Fiscal Agent. The Fiscal Agent must also show proof that it is a government agency, a for-profit entity, or a private non-profit agency with 501(c)(3) status.</li> </ul>
Eligible Clientele	Project must serve San José residents. Clientele or service area must be described.
Eligible Category	<p>The HNVF Program has three (3) funding categories:</p> <ul style="list-style-type: none"> <li>• Tobacco-Free Community/Health</li> <li>• Education/Health</li> <li>• Senior Services/Health</li> </ul> <p>AN AGENCY MAY SUBMIT A MAXIMUM OF TWO (2) PROPOSALS IN ANY CATEGORY.</p>
Eligible Activity:	<p>PROPOSED PROJECT MUST CONSIST OF ELIGIBLE ACTIVITIES. ELIGIBLE ACTIVITIES ARE LISTED ON PAGES 8-11.</p>
Minimum/Maximum Request	<p>The minimum grant request that will be considered for funding is \$25,000. Applicants requiring less than \$25,000 may collaborate and apply with other applicants that provide similar services.</p>

## ADDITIONAL ELIGIBILITY REQUIREMENTS FOR NON-PROFIT AGENCIES

All non-profit organizations applying for funding must meet the following requirements:

1) Governing Body

Governing of the organization should be vested in a responsible and active voluntary Board that meets at least quarterly and establishes and enforces policies. The Board should be large enough and so structured as to be representative of the community it serves.

2) Personnel

The organization must provide for adequate administration and staffing of the program to ensure delivery of services.

3) Non-Discrimination

Each organization receiving funds from the City is required to assure that it will conduct its business in compliance with the non-discrimination requirements of the City, State, and Federal governments, as applicable.

4) Accounting

Each organization shall maintain accounting records that are in accordance with Generally Accepted Accounting Practices. If they receive sufficient federal funds (currently \$300,000), some organizations must also comply with the administrative requirements of **OMB Circular A-133**, "Audits of Institutions of Higher Education and Other Non-Profit Organizations." OMB Circulars A-133 and A-122 are available for review in the Grants Unit of PRNS, 4 North Second Street, Suite 600, or online at <http://clinton4.nara.gov/textonly/OMB/circulars/a133/a133.html> and <http://clinton4.nara.gov/textonly/OMB/circulars/a122/a122.html>

5) Audits

**Funded projects will be required to submit an independent audit that covers the period for which HNVF funds were provided. The audit must be submitted within 150 days of the end of the organization's fiscal year.** If an agency prefers to have another agency act as the Fiscal Agent for the project, it may do so if the Fiscal Agent meets the eligibility criteria for the program(s). A signed Statement of Fiscal Agent Responsibilities Form must also be provided with the proposal by the submittal deadline. Fiscal Agents of funded projects will be required to submit an independent audit that covers the period for which HNVF funds were provided. The audit must be submitted within 150 days of the end of the Fiscal Agent's fiscal year. **An agency may use a Fiscal Agent only once.**

## V. HNVF FUNDING CATEGORIES AND ELIGIBLE ACTIVITIES

### ***TOBACCO-FREE COMMUNITY***

Available funds under the Tobacco-Free Community category shall be expended for existing or new anti-tobacco programs. Applicants that offer culturally sensitive and linguistically appropriate programs will be given strong consideration.

Goal:

*To decrease the use of tobacco products and related health problems associated with tobacco use for San José residents, contributing to improved overall health for the City's population.*

Target Population:

- School-aged youth
- Teens and adults identified as “tobacco users”

Eligible Activities:

Activities that will be considered for funding are:

- **Prevention and Education** programs that operate in the community or schools to prevent young people from becoming addicted to tobacco and programs that educate the public about the dangers of tobacco use and secondhand smoke.
- **Tobacco Cessation** programs for teens and adults, including seniors, that provide proven techniques for quitting tobacco use, as identified by the American Lung Association.
- **Counter-Marketing** programs that promote a healthy, tobacco-free lifestyle.
- Services that coordinate with and support the **enforcement of existing laws and ordinances** pertaining to the sale and display of tobacco products, such as Code Enforcement relating to smoking in public establishments, e.g. bars and restaurants.

The American Lung Association (ALA) is developing a strategic plan for a tobacco-free community. The ALA has a resource library of best practices in tobacco control. Applicants are encouraged to review their proposed projects vis-à-vis these best practices. Proposed projects employing documented best practices in tobacco control will be favorably considered. **Funded applicants will be required to participate in the Tobacco Collaborative that is currently headed by the ALA.**

**For information regarding Best Practices for Tobacco Control programs please visit:**

<http://www.cdc.gov/tobacco/bestprac.htm>: CDC's *Best Practices for Comprehensive Tobacco Control Programs* is an evidence-based guide to help states plan and establish effective tobacco control programs to prevent and reduce tobacco use.

## ***EDUCATION***

Available funds under the Education category shall be expended for new education programs or expansion of existing education programs that promote school success and improve learning outcomes for students. To be considered for funding, projects must target and measure one or more of the following Developmental Assets:

- **Creative Activities** – Young person spends three or more hours per week in lessons or practice in music, theater, or other arts. (Asset #17)
- **Youth Programs** – Young person spends three or more hours per week in sports, clubs, or organizations at school and/or in the community. (Asset #18)
- **Restraint** – Young person believes it is important not to be sexually active or to use alcohol or other drugs. (Asset #31)
- **Planning and Decision Making** – Young person knows how to plan ahead and make choices. (Asset #32)
- **Interpersonal Competence** – Young person has empathy, sensitivity, and friendship skills. (Asset #33)
- **Cultural Competence** – Young person has knowledge of and comfort with people of different cultural/racial/ethnic backgrounds. (Asset #34)
- **Resistance Skills** – Young person can resist negative peer pressure and dangerous situations. (Asset #35)
- **Peaceful Conflict Resolution** – Young person seeks to resolve conflict nonviolently. (Asset #36)

The 41 Developmental Assets defined by the Search Institute and Project Cornerstone are essential building blocks for young people's achievement, as well as avoidance of high-risk behaviors. The eight Developmental Assets listed above were selected because they are the most relevant and appropriate to HNVF funding.

### Goal:

*To improve the academic success of San José students through programs that address unmet health care needs and provide for healthy developmental age-appropriate activities.*

### Target Population:

- Pre-school aged youth (0-5)
- School-aged youth (6-18)
- Schools or communities with limited educational services
- Youth exhibiting high-risk behaviors such as truancy and disregard for academics

Eligible Activities:

Eligible activities must support an increase in one or more of the Developmental Assets listed on page 9. Some of the funding area-related activities that will be considered in the application review include, but are not limited to:

- Early childhood development/learning-readiness for kindergarten
- Social development
- Academic tutoring and homework assistance
- Literacy projects
- Truancy intervention
- G.E.D. preparation
- Alternative schools and special education programs
- Student and teacher safety on and around campus
- Health care delivery on school sites
- Health insurance to children who lack coverage
- Academic enrichment programs
- After School Programs

Applicants are encouraged to propose projects that serve middle school students, as this is a target population requiring additional attention.

Reminder: Projects being proposed in the Education/Health category must include an Anti-Tobacco component. For more information on this requirement, see page 3.

## ***SENIOR SERVICES***

Available funds under the Senior Services category shall be expended for new senior programs, the expansion of existing senior programs, and for senior discount programs for City provided services.

### Goal:

*To improve the quality of life for seniors by increasing subsidized programs and services, providing for basic health and nutritional needs, and promoting independent living through social and recreational activities.*

### Target Population:

- Seniors residing in San José

### Eligible Activities:

Funding area-related activities that will be considered in the application review include, but are not limited to:

- Nutrition programs
- Senior adult day care
- Senior housing programs
- Elder abuse protective services
- Programs that support independent living needs
- Transportation services
- Affordable housing services
- Programs that include education component related to smoking-related illnesses
- Social/recreational day and/or evening activities
- Programs that increase the accessibility and affordability of health services for seniors
- Programs that create greater access to senior discount programs and services for City-sponsored or operated programs (discounts for sewer, garbage, transit, recreation)

The City is currently updating its Aging Services Master Plan. Applicants are encouraged to check with the Office on Aging at 277-4561 regarding the status of the Master Plan update.

Reminder: Projects being proposed in the Education/Health category must include an Anti-Tobacco component. For more information on this requirement, see page 3.

## VI. PROPOSAL SUBMISSION

Applicants must submit all materials prior to the application deadline of Monday, December 6, 2004 at 5:00 PM. HNVF staff will review all proposals received for missing or incomplete information at the time of submission of the proposal. Applicants should carefully check their proposals prior to submission to ensure that all of the questions are complete and all attachments are included. **Applicants may not submit missing items, supplemental information, or supporting documentation after the submission deadline.** It is strongly recommended that all applicants contact a HNVF analyst to review a draft of their applications at least two weeks prior to the deadline for submission of the proposal.

## VII. PROPOSAL EVALUATION CRITERIA AND PROCESS

City staff, category experts, and the HNVF Advisory Committee will review and evaluate completed proposals. In evaluating eligible projects, the criteria listed below will be used to assess eligible projects and to recommend projects for funding. Each proposal will be assessed on how well the project will address each criterion. The assessment a project receives will be based on the information provided in the application.

### PHASE 1

Screening for Eligibility includes verification of the following eligibility requirements:

- a) Eligible Applicant – Applicants must be a government entity, a non-profit agency with a 501(c)(3) status, a for profit agency with proof of business status and a license to do business in San José, or a recognizable association of people with a Fiscal Agent who agrees to abide by the City's grant agreement on behalf of the association. A Fiscal Agent must meet all eligibility requirements.
- b) Eligible Category – Proposals must align with one or more of the three HNVF funding categories: Tobacco-Free Community/Health, Senior Services/Health, or Education/Health.
- c) Eligible Activity – Proposed activity must be one of the approved activities. These activities have been narrowed to align with the City Council approved goal for each category and are listed on pages 8-11.
- d) Eligible Clientele - Clients to be served by the proposed project must be San José residents.
- e) Completeness of project proposal, including budget, budget narrative, and budget broken down by activity.

**This year, only service-related projects will be considered for funding. Physical improvement projects (construction projects) will not be funded.**

## PHASE 2

### Pre-Screening and Rating of Proposals

City staff will rate all proposals that have met and passed the pre-screening criteria. Staff will apply the Rating Scale to each proposal, record the ratings, and submit the ratings together with the project analysis to the HNVF Advisory Committee for consideration. Applicants will be provided an opportunity to review and correct factual errors in the ratings prior to the Ratings Presentation meeting of the HNVF Advisory Committee on February 28, 2005.

Screening for Capacity includes a determination of whether the proposed project aligns with the focus of the category in which the proposed project qualifies (Needs), an evaluation of the applicant's ability to successfully implement a proposed project (Capacity to Achieve Results), and the applicant's overall track record of accomplishing goals in a timely manner (Operational Performance).

Screening for Leverage includes a determination of whether the proposed project demonstrates a minimum 20% cash match. This cash match may include the documented cash value of donated rent or utilities, but may not include other in-kind donations. Applications not meeting the minimum 20% cash match requirement will not be considered for funding.

**Proposed projects that are not in alignment with the focus of the category for which they are applying, applicants who have not met the eligibility criteria, applicants who have not demonstrated the capacity to achieve the desired results, applicants who do not meet the minimum leverage requirement, and applicants who do not have a track record of accomplishing goals will not be considered for funding and will not move forward in the evaluation process.** Applicants will be notified in writing if their proposal will not be considered for funding, including the reason why the application will not be considered. Applicants may appeal a negative determination. Please refer to the attached Appeals Process.

Proposed projects that demonstrate alignment with the focus of an HNVF category as well as promote a new and unique service delivery approach (i.e. an Innovative Project) and are submitted by an applicant that has not demonstrated overall track record but does not have a negative evaluation from other funding sources, including other City grant programs, and has demonstrated sound financial practices, may be considered for funding under the Innovation Fund at the discretion of the Advisory Committee. This Innovation Fund was created to encourage new approaches to delivering services.

The following is a two-pronged rating system for proposed projects:

- A. Pre-Screening: A Two-Point Rating Scale consisting of "Yes" and "No" will be used to evaluate and limit the applications to be considered for funding. Only those applications demonstrating alignment with the focus of each category (Needs), the capacity to achieve desired results (Capacity to Achieve Results), and an overall track record of accomplishing goals (Operational Performance) will be considered for funding. **Applications that receive a "No" rating** have not demonstrated that a successful project can be



implemented. Applicants must also meet the minimum requirement of a 20% cash match. **Projects receiving a “No” rating or not meeting the 20% cash match requirement will not be considered for funding. They will be notified in writing that their application will not be considered for funding, including the reason why their application will not be considered.** Applicants may appeal a negative determination. Please refer to the attached Appeals Process.

Rating Criteria	Description	Rating Type
Statement of Needs	Meets a demonstrated community need and has clearly stated funding need for a project that falls within one of the funding categories. Articulates how the proposed project addresses the need.	<p><b>Yes:</b> Agency demonstrates need and proposed project can feasibly and credibly address the need.</p> <p><b>No:</b> Proposed project does not directly relate to addressing the need.</p>
Capacity to Achieve Results	Demonstrates an ability to successfully implement proposed project.	<p><b>Yes:</b> Agency has expertise, experience, sufficient level of staffing, and an established (best practices) approach to meet the need.</p> <p><b>No:</b> Agency does not have the experience, sufficient level of staffing, or an established approach to meet the need.</p>
Operational Performance	Demonstrates a successful overall track record of accomplishing goals in a timely manner.	<p><b>Yes:</b> Good to excellent prior performance.</p> <p><b>No:</b> Has a poor performance record- had difficulty accomplishing goals</p>
Leverage	<p>Minimum Leverage Requirement: projects must demonstrate a 20% cash match to be considered for funding. (20% of the total project budget)</p> <p>The cash match may include the documented cash value of donated or subsidized rent or utilities. For documentation requirements, see page 27.</p>	<p><b>Yes:</b> Project meets the 20% cash match requirement.</p> <p><b>No:</b> Project does not meet the 20% cash match requirement.</p>

- B. Proposal Rating: Applications moving beyond the pre-screening phase will be rated. A Three-point Likert Scale ranging from Low – Medium – High will be used to rate the following evaluation criteria:
1. Project Design;
  2. Work Plan;
  3. Project Outcomes; and
  4. Leverage.

Proposed projects will be funded based primarily on the rating received. Although the rating is the primary basis for the decision to fund a project, it is emphasized once again that a high rating does not guarantee funding. Other indicators such as geographic equity of services, service gaps that require immediate attention, maintenance of vital services to minority populations, and under-funded services will be considered. **Applicants will be informed in writing that their application will not be considered for funding**, including the reason why their application rated “Low.” Applicants may appeal a negative determination. Please refer to the attached Appeals Process.

Rating Criteria	Description	Rating Type
Project Design	Proposed service is explained, clearly described and includes the location of services, number of clients served, and hours of operation. Demonstrates how it impacts the community need identified.	<p><b>High:</b> Applicant demonstrates that the proposed services will significantly impact a community need and will achieve the desired project results.</p> <p><b>Medium:</b> Applicant demonstrates that the proposed services will impact a community need and will achieve the desired project results.</p> <p><b>Low:</b> Applicant does not demonstrate that the proposed services will impact a community need and will achieve the desired project results.</p>
Work Plan	Illustrates an achievable work plan for the proposed project, with reasonable inputs, outputs, and activities to obtain the stated results.	<p><b>High:</b> Applicant has successfully implemented proposed work plan that includes reasonable inputs, outputs and activities to obtain the stated results.</p> <p><b>Medium:</b> Presents an achievable work plan, with reasonable inputs, outputs and activities to obtain the stated results.</p> <p><b>Low:</b> Does not present an achievable work plan, with reasonable inputs, outputs and activities to obtain the stated results.</p>

Rating Criteria	Description	Rating Type
Project Outcomes	Quantifiable outcome measures are stated and shows evidence that the approach has been successful. Outcomes are realistic and agency has clearly defined the measurement methodology.	<p><b>High:</b> Applicant currently measures or presents an intermediate outcome that measures the intended results of the project; there is a clear connection between the outcome, the services provided, and the needs addressed; outcomes are quantifiable and supported by clear measurement methods.</p> <p><b>Medium:</b> Applicant presents outcomes that measure the intended results of the project; there is a clear connection between the outcome, the services provided, and the needs addressed; outcomes are not quantifiable and measurable or are not supported by clear measurement methods.</p> <p><b>Low:</b> Applicant does not present outcomes that measure the intended results of the project; there is no clear connection between the outcome, the services provided, and the needs addressed; outcomes are not quantifiable and measurable or are not supported by clear measurement methods.</p>
Leverage	<p>Demonstrates substantial leveraging of funding sources other than the City's. Coordinates proposed services with City departments or other key players.</p> <p><b>Minimum Leverage Requirement:</b> projects must demonstrate a 20% cash match to be considered for funding.</p> <p>The cash match may include the documented cash value of donated or subsidized rent or utilities. For documentation requirements, see page 27.</p>	<p><b>High:</b> 50% or greater cash match plus other diversified funding base, in-kind leverage, and/or collaboration that results in increased, expanded, or enhanced services and/or expanded target population.</p> <p><b>Medium:</b> 36-50% cash match plus other in-kind leveraging and/or coordination that demonstrates proposed expansion or new services have been coordinated with existing services.</p> <p><b>Low:</b> 20-35% cash match</p>

### **PHASE 3**

#### Project Analysis and Advisory Committee Review

The HNVF Advisory Committee will be given an analysis of each application that meets the eligibility criteria. Analysis shall include a review of the rating criteria listed on pages 12-16. The Committee will review project analyses and ratings prior to their working meetings on March 16, 2005 and April 6, 2005.

### **PHASE 4**

#### Funding Recommendations

Funding recommendations will be provided by Administration to the HNVF Advisory Committee. The Committee will discuss Administration's funding recommendations in a public meeting, after which the Committee will formulate its funding recommendation to the City Council.

### **PHASE 5**

#### Grant Awards

The City Council has the final authority to fund projects. The HNVF Advisory Committee's funding recommendations will be forwarded to the City Council in May.

## VIII. GENERAL INFORMATION

A. Term of Contract

It is the intent of the City of San José to contract with selected grantees from July 1, 2005 through June 30, 2006.

B. Funding Amounts

The funding amount for the agreement, July 1, 2005 – June 30, 2006, will be determined as a result of this application process. Grant awards will be contingent upon all of the following conditions being satisfied:

1. The HNVF funds are available and included in the City of San José Budget.
2. Satisfactory performance under prior and existing contracts with the City.
3. Fulfillment of funding contingencies specified for the project for award of funds, if any.

C. Use of Funds

The HNVF Program is a reimbursement program. Funded agencies are reimbursed on a quarterly basis for actual expenses incurred in the delivery of services or for expenses incurred to complete the physical improvement project.

No 2005-2006 HNVF funds can be spent for expenses incurred prior to the following:

- approval of the San José City Council; and
- the start of the 2005-2006 Program Year which begins on July 1, 2005.

Reimbursements can be made only upon full execution of an Agreement between the City and the funded agency for the HNVF project.

D. Funding Requests

THE MINIMUM GRANT REQUEST AND AWARD THAT WILL BE CONSIDERED IS \$25,000. There is no maximum amount that can be requested. However, **all applicants should be thoughtful and strategic in the amount of funding requested.**

E. Innovation

The higher of \$500,000 or 5% of available 2004-2005 Fiscal Year funds has been set aside for allocation to innovative projects. These funds are designed to encourage innovative projects that are responsive to the goals of the HNVF program and to assist non-profit agencies in developing their capacity to provide services that are unique. An innovative project is defined as a project that employs a new, untried service delivery method for a project that aligns with the HNVF goals, strategic impact areas, and long-term outcomes for the impact areas. Innovation funds are also designed to assist non-profit agencies in developing their capacity to provide services that are unique. Applications may be considered under the Innovation category at the discretion of the HNVF Advisory Committee.

F. Additional documentation that will be requested upon award of funds includes:

- 1.\* Copy of Articles of Incorporation as a non-profit organization
- 2.\* Copy of by-laws that clearly define the purpose, functions, organization, and lines of authority of the applicant organization
3. List of names of the members of the Board of Directors
- 4.\* Tax Exempt Letter from the State
5. Board Resolution authorizing the agency to enter into an agreement with the City of San José for the HNMF grant program and authorizing an agency representative to sign related legal documents on behalf of the agency
6. Insurance Certificate that satisfies all requirements. For a detailed description of current insurance requirements applicants may call the HNMF office or download the "Insurance Requirements" document from the web:

<http://www.sanjoseca.gov/prns/hnmf.htm>

**\*If applicants currently have a contract with the City for HNMF, CDBG, or BEST, applicants will not need to reissue the documents noted with the asterisk, unless there has been a change.**

## **IX. WORKSHOPS AND TECHNICAL ASSISTANCE**

Technical assistance is offered for the HNVF program in the form of workshops, telephone consultations, and individual appointments with HNVF staff. It is the City's goal to assist applicants in preparing competitive proposals.

### **Workshops**

HNVF staff will conduct two workshops to assist applicants in completing the application and to enhance applicants' understanding of HNVF requirements. **It is strongly suggested that applicants attend the workshops.** The Workshop schedule is listed in "Section I. Application Timeline" (page 1). To register for the following workshops, contact Joséphine Browne at (408) 277-3707.

#### **Workshop 1 - Eligibility and Application Instructions**

This workshop will include a discussion of the eligibility and rating criteria, and instructions on how to complete the application.

#### **Workshop 2 - Outcomes and Performance Measures**

This workshop will cover the identification of outcome statements and performance measures for proposed projects (a required component of the application). Performance measures are means of measuring program outcomes. A performance measure should demonstrate who will benefit from achieving this objective, and what attitude, behavioral adjustment, condition, or situation will change as a result of the proposed project.

### **Telephone Consultations/Individual Appointments**

HNVF analysts are available for telephone consultations during the application period. Please contact any analyst with any questions regarding the application or to discuss a proposed project. HNVF analysts may be reached at (408) 277-3707.

## **X. APPEALS PROCESS**

### **PURPOSE**

To define the manner by which applicants may appeal City staff decisions regarding eligibility and screening criteria.

### **BACKGROUND**

City staff, through its application review function, provides written responses on determinations of eligibility for funding or other screening criteria. In situations where disagreements may arise between the City staff and the applicant regarding determinations, the formal appeal process set forth below is available and should be utilized.

Any negative decisions by City staff regarding the application for HNVF funds must be in writing. The decision must state the rationale and cite the reasons for the determination. It must advise the applicant of the applicant's right to appeal the decision.

### **POLICY**

It is the policy of the City that appeals to decisions made by the City staff regarding the application must be in writing and within five (5) working days of receipt of the determination. The appeals must state that it is an appeal, identify what the problem is, what portion of the application is being addressed, what the applicant wants to be done, what effect a decision other than that desired would have on the project or the applicant, and any information that would assist in making a decision.

It is the policy of the City that responses to the appeal will be made by the Director of Parks, Recreation and Neighborhood Services and one designated HNVF Committee member within ten (10) working days from receipt of the appeal. The response will be made in writing and will provide the rationale if the response is not that desired by the applicant. The determination made by the Director of PRNS together with the designated HNVF Committee member is final.



## XI. PROPOSAL CONTENT AND INSTRUCTIONS



To apply for funds, please hand deliver one (1) unstapled original and four (4) stapled copies of the proposal to Parks, Recreation and Neighborhood Services, 4 N Second Street, Suite 600 by **Monday, December 6, 2004, 5:00 P.M.** Any proposal that is late, fails to meet eligibility requirements, or fails to follow submission instructions will not be considered for funding. Only one (1) copy of the “Agency Documents” (see below) needs to be submitted.

### Proposal Format

All proposals must be:

- typed, using Times New Roman 12-point font
- single spaced
- one (1.0) inch margins on all sides of each page
- within page limits allocated for each section
- labeled on each page (except for the Cover Sheet) with a header in the upper right corner (include the agency name on the first line and the title of the project on the second line)

### Proposal Components

Proposals must include the following:
<b>Form A</b> – Checklist ( <i>one copy only</i> )
<b>Form B</b> – Cover Sheet
<b>Form C</b> – Project Narrative
<b>Form D</b> – Work Plan
<b>Form E</b> – Budget
<b>Form F</b> – Budget Narrative
<b>Form G</b> – Resource Table
<b>Form H</b> – Certification and Assurances
<b>Form I</b> – Statement of Fiscal Agent Responsibilities (if applicable)
<p><b>Agency Documents</b> (<i>one copy only</i>)</p> <p style="padding-left: 40px;">Letter of Commitment from agency’s Board of Directors that demonstrates approval of the organization’s proposal submittal</p> <p style="padding-left: 20px;">* Proof of Non-Profit Status</p> <p style="padding-left: 40px;">List of Board of Directors</p> <p style="padding-left: 40px;">Overhead Rate Documentation (if applicable)</p> <p>*If applicant currently has a contract with the City for HNVF, CDBG, or BEST, the applicant will not need to reissue the document noted with the asterisk, unless there are changes to the documents.</p>

## **Instructions**

### **Form A – Checklist**

Check the appropriate box to indicate that the items are attached. All documents must be properly labeled. (See *Proposal Format* above.)

Application should be submitted in the order shown on Form A.

### **Form B – Cover Sheet**

The Cover Sheet must be completed accurately and signed by the authorized applicant representative. *The HNVF staff will use **email** to correspond with applicants.* If applicants do not have email, or if it is not a reliable method of communication, leave the email line blank.

### **Form C – Project Narrative**

Respond to all questions on Form C. **Do not exceed seven (7) pages for this section.**

1. Label the Narrative section “Form C – Project Narrative.”
2. Type each **Section** (I. Needs, II. Project Design, et cetera) applicants are answering in **bold**.
3. Number the pages in the footer.
4. Do not exceed the page limits for each section.
5. Use only type font size of 12-point, Times New Roman, 1 inch margins on 8-½ x 11 letter size paper.

### **Form D – Work Plan**

Complete a work plan for the proposed project using Form D.

*Long-Term Outcome:* Select the long-term outcome statement from the *HNVF GOALS, IMPACT AREAS AND LONG-TERM OUTCOMES* table on page 4 that asserts the desired result of the proposed project.

*Total Number of Unduplicated Participants:* Provide the number of participants that will be served by the proposed project, regardless of how many activities they participate in. Each participant should be counted only once for the year.

*Activities:* This component should address a specific activity or set of activities that affect a specific group to accomplish project outcomes.

*Number of Participants:* Detail the number of participants served by each activity.

*Number of Sessions:* Detail the number of times the activity will be provided.

*Performance Measures:* Performance measures are ways to measure program outcomes. Please detail at least one performance measure that the applicant will use for each program outcome chosen. Express the performance measure as a percentage of clients who participated in the activity that exhibit the desired change in behavior or desired result.

Examples:

85% of students who attend the career preparation workshop will complete a plan for higher education or entering a career.

50% of clients who attend the Let's Stay in School Program will have an absentee rate of fewer than 6 days for the remainder of the school year.

*Data Collection Method or Measurement Methodology:* Specify the method the applicant will use to measure the objective. Data collection methods include surveys, focus groups, interviews, report cards, and pre- and post-tests.

*Frequency of Collection:* Specify how often the applicant will collect the data. For example, "The agency will administer a survey to our participants at the end of each semester." The HNMF Program requires reporting of activities and unduplicated participants on a quarterly basis and outcome reports on a semi-annual basis.

### **Form E – Budget**

The budget form summarizes the entire proposed budget and shows the distribution by line item. This form should reflect the costs for the period 7/1/05-6/30/06. Also include "other funds" in the column provided to show matching funds for the proposed project. **Form E** details the amount requested to operate the proposed project.

Applicant must also indicate how the total HNMF grant request breaks down by individual activity. In the columns provided on Form E, show the amount of the HNMF grant request that will be used for each activity being proposed.

See example budget on page 25.

Example:

<b>PROPOSED OPERATING EXPENSES</b>	<b>Total HNVF Grant Request  COL 1</b>	(Breakdown of Total HNVF Request) <b>Budget for Activity 1 <i>Field Trips</i></b>  <b>COL 2</b>	(Breakdown of Total HNVF Request) <b>Budget for Activity 2 <i>Workshops</i></b>  <b>COL 3</b>	(Breakdown of Total HNVF Request) <b>Budget for Activity 3 <i>Anti- Tobacco Activities</i></b>  <b>COL 4</b>	<b>Other Funds (Leverage)  COL 5</b>	<b>Total Project Cost (COL 1 + COL 5)</b>
<b>Personnel Services</b>	35,000	13,000	13,000	9,000	29,000	64,000
Fringe Benefits	7,000	2,600	2,600	1,800	5,700	12,700
Supplies	1,000	200	500	300	200	1,200
Communication	1,000	300	500	200	200	1,200
Printing	1,500	0	1,000	500	1,230	2,730
Utilities	300	100	100	100	250	550
Occupancy	2,000	666	667	667	1,640	3,640
Travel	200	200	0	0	165	365
Insurance						
Equipment Rental						
Equipment Purchase						
Contract Services	1,400	0	1,400	0	1,125	2,525
Audit	600	200	200	200	490	1,090
Overhead						
<b>Total Operating Expenses</b>	50,000	17,266	19,967	12,767	40,000	90,000

This contract will be cost-reimbursable on a quarterly basis. Cost-reimbursable contracts are those based on actual expenditures. Grantees will be asked to produce receipts, cancelled checks, and supporting documents during a site visit.

Personnel Services: Enter the salary for each staff member to be paid by HNVF. Do not list administrative staff here if included in the Overhead line item.

Fringe: Included in this line item are payroll-related costs such as FICA, health insurance and retirement benefits, and Workers' Compensation, and other payments made on behalf of employee.

Supplies: Enter costs for consumable commodities which have a useful life of one (1) year or less, or which cost less than Five Hundred Dollars (\$500) and which render services essential to the operation of the project.

Communication: Enter costs for telephone, telegraph, postage, and other communication costs that are essential to the operation of the project.

Printing and Advertising: Enter costs for printing and duplicating services, newspaper printing by contract; and newspaper advertising which is essential to the operation of the project. Supplies such as paper or fluids for a copy machine owned or leased by the organization for project use may be charged to this category.

Utilities: Enter the prorated costs for water, gas, electric, garbage and trash collection, and similar expenses for the project.

Occupancy: 1) Appropriate portion of rental charges for real property, i.e. office space for the project attributable to this HNVF or 2) occupancy costs for a building owned by the recipient may be included as a budgeted item if: a) it is necessary for the services provided under this grant and b) costs are allocated among funding sources and c) the amount charged is calculated as specified in OMB Circular A-122, "Cost Principles for Non-profit Organizations" if the organization is also receiving federal funds.

Travel: Enter cost for automobile mileage, transportation, and all necessary and ordinary travel expenses while on official project business within and outside of Santa Clara County. All out-of-state travel must be approved by City prior to any expenditure for such travel. Note any out-of-state travel that will be paid with HNVF funds.

Insurance: Enter the prorated cost of insurance and other related services for the project.

Equipment Rental: Enter costs for rental of equipment that is essential for the operation of the project. Equipment is defined as tangible property other than land and buildings, or building improvements, having a useful life of more than one (1) year, the unit cost of which is Five Hundred Dollars (\$500) or more.

Equipment Purchase: Eligible payments for the purchase of equipment essential for the operation of the project in those instances where it is more cost effective to purchase equipment than it is to rent it. All equipment purchases require prior City approval. Note the equipment to be purchased in the application.

Contract Services: This category should include payments made to individuals who provide professional, scientific, or technical services or any other services that the agency does not have the capability of performing itself to operate the program, but who are not applicant's employees. For example, this category may include consultants, trainers, evaluators, therapists, and social workers.

Audit Fees: Prorated cost for payments to an independent Auditor to perform the required audit.

Overhead: Overhead costs may only be submitted for projects that have a federally negotiated overhead rate or an approved rate from a Certified Public Accountant (CPA). **The application must include either a letter from the federal agency indicating the agency's federally negotiated overhead rate OR a letter from a CPA verifying that the agency's overhead rate was calculated in accordance with OMB Circular A-122. The letter must also include a list of what costs are included in the overhead rate.**

The following costs are not allowed: Out of country travel and depreciation on buildings or equipment.

#### **Form F – Budget Narrative**

Complete a Budget Narrative for the proposed project. List each budgeted item for the entire proposed project and give an explanation of how it contributes to the success of the program.

#### **Form G – Resource Table**

**Resource Table:** List all other funds to be used for this project that have been received or the applicant expects to receive and then list other in-kind resources that will be used to support the project. In the last column on the right, provide the level of commitment for all resources, using one of the following terms: received, projected, and pending. Do not include this grant request on the resource table. The total funds on the resource table should match the “other funds” total on the budget attachment.

Level of Commitment Definitions:

**Received:** Funds on hand or a firm commitment for funding (requires an agreement or letter confirming funding).

**Projected:** Anticipated renewal of existing funding or a realistic projection of fees, donations, and other revenues based on prior year actuals.

**Pending:** Funds have been applied for and are likely to be received. (NOTE: only include amounts that the agency reasonably expects to receive.)

Cash match may include the documented cash value of donated or subsidized rent or utilities, but may not include other in-kind donations. If the resource table includes the cash value of donated or subsidized rent or utilities, applicant must attach the appropriate documentation to this application. For donated or subsidized rent, the required documentation is a letter from the landlord indicating the fair market value of the property being rented. For donated or subsidized utilities, the required documentation is a copy of the utility bill for the property in question. This documentation must be submitted at the time of application in order for rent or utilities to be included in the resource table.

#### **Form H – Certification and Assurances**

Authorized agency representative must sign this form.

#### **Form I – Statement of Fiscal Agent Responsibilities**

Fiscal Agent must sign the Statement of Fiscal Agent Responsibilities form showing agreement to apply for funding on the applicant's behalf and to comply with the responsibilities of a Fiscal Agent.

**This form is not applicable if the agency is not applying through a Fiscal Agent.**

## FORM A – HNVF Proposal Checklist

AGENCY NAME: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

<b><u>Yes</u></b>	<b><u>No</u></b>	
<input type="checkbox"/>	<input type="checkbox"/>	Form A – HNVF Proposal Checklist
<input type="checkbox"/>	<input type="checkbox"/>	Form B – HNVF Cover Sheet
<input type="checkbox"/>	<input type="checkbox"/>	Form C – Project Narrative
<input type="checkbox"/>	<input type="checkbox"/>	Form D – Work Plan
<input type="checkbox"/>	<input type="checkbox"/>	Form E – Budget
<input type="checkbox"/>	<input type="checkbox"/>	Form F – Budget Narrative
<input type="checkbox"/>	<input type="checkbox"/>	Form G – Resource Table
<input type="checkbox"/>	<input type="checkbox"/>	Form H – Certification and Assurances
<input type="checkbox"/>	<input type="checkbox"/>	Form I – Statement of Fiscal Agent Responsibilities (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	Leverage Documentation for Rent or Utilities (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	<b>Agency Documents</b> (if applicable) [submit 1 set only]
<input type="checkbox"/>	<input type="checkbox"/>	Letter of Commitment from agency's Board of Directors that demonstrates approval of the organization's proposal submittal
<input type="checkbox"/>	<input type="checkbox"/>	Proof of Non-Profit Status – 501c(3) documentation
<input type="checkbox"/>	<input type="checkbox"/>	List of Board of Directors
<input type="checkbox"/>	<input type="checkbox"/>	For-Profit: proof of entity & San José business license
<input type="checkbox"/>	<input type="checkbox"/>	Most recent agency audit and management letter (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	Explanation of Reportable Conditions in Audit
<input type="checkbox"/>	<input type="checkbox"/>	Overhead Rate Documentation (if applicable)

**Incomplete proposals will not be accepted.**

**FORM B – HNVF Cover Sheet**

For PRNS Use Only:

Prj. ID \_\_\_\_\_  
(if previously funded)

Date submitted: \_\_\_\_\_

Proposal # \_\_\_\_\_

Legal Name of Organization \_\_\_\_\_

Project Name \_\_\_\_\_

**Funding Category**☐ Tobacco-Free Community☐ Education☐ Senior Services**Applicant Status (check one box below)**☐ Non-Profit with 501c(3) status☐ Governmental Jurisdiction☐ For-Profit with Proof of Legal Status☐ City of San José☐ Association with a Fiscal Agent (Attach Statement of Fiscal Agent Responsibilities Form.)***HNVF Project Funding Information***

<p>2005-2006 <u>Project Request</u></p>		<p>Previous HNVF grant awards for this or similar project:</p> <p>2000-01: \$ _____</p> <p>2001-02: \$ _____</p> <p>2002-03: \$ _____</p> <p>2003-04: \$ _____</p> <p>2004-05: \$ _____</p>
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***Council District(s) where proposed services will be provided:*** \_\_\_\_\_***Brief Program Description: (five-line summary of the proposed project – 12pt.)***

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***Contact Information:***

Project Contact Person \_\_\_\_\_ E-mail \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

I hereby certify that I am the authorized Representative of the above Applicant/Agency and to the best of my knowledge and belief, all data in this application is true and correct, the governing body of this applicant has duly authorized the document and the applicant will comply with the necessary certifications and assurances if a contract is awarded.

Representative's Name and Title: \_\_\_\_\_

Representative's Signature and Date: \_\_\_\_\_



## **FORM C – Project Narrative**

### **I. Needs Statement**

Attach answers not to exceed one (1) page for the following questions:

1. Describe the existing conditions, circumstances, behaviors or opportunities that the organization proposes to address with HNVF funds.
2. Describe the target population the proposed project will serve.
3. Describe the aspects of the need the project will address. Include relevant facts or trend data in San José or Santa Clara County to substantiate the need and cite the sources.
4. Describe how the proposed project aligns with the City of San José adopted Master Plans, such as the Blueprint for Bridging the Digital Divide (Youth Services Master Plan), the Investing in the Future, San José's Early and Child Care and Education Strategic Plan, and the Aging Services Master Plan.
5. Describe how the proposed project directly contributes to the HNVF goals.

### **II. Project Design**

Attach answers not to exceed two (2) pages for the following questions:

1. Describe the proposed program design, the rationale for using this particular approach, and how it impacts the community need identified.
2. Describe the specific services and activities to be conducted in the proposed project, and the number of clients to be served and how the proposed services meet the identified needs.
3. Indicate the location(s) and hours of each service provided for this project.
4. Indicate the geographic area covered by the proposed services, including San José Council District(s) and Strong Neighborhood Initiative (SNI) areas, if applicable.
5. Describe how the proposed project is culturally sensitive and linguistically appropriate for the community served.
6. Identify the activities that each staff will provide.
7. If claiming proposed project is innovative: Describe how the proposed project is innovative, unique, and new to San José. Describe how service delivery is innovative.
8. Anti-Tobacco Activity: if the applicant is applying in the Education/Health or Senior Services/Health category, describe the anti-tobacco component the applicant will include in the project. Include a description of the activity, the number of unduplicated participants served by the activity, the service delivery method, and frequency of the activity. See page 3 for more information on this requirement.

### **III. Project Outcomes & Performance Measures**

Attach answers not to exceed two (2) pages for the following questions:

1. State the outcome the applicant is attempting to achieve with the proposed project. (Select an outcome from page 4.)
2. State two (2) or more performance measures. A performance measure should demonstrate who will benefit from achieving this objective; what attitude, behavioral adjustment, condition or situation will change as a result of the proposed project.
3. Describe how the performance measure will contribute toward achieving the outcome.
4. If claiming proposed project is innovative, describe how innovative service delivery will achieve intended outcomes.
5. Show evidence that the approach has been successful in the past by providing details from formal and informal evaluations that demonstrate achievement of desired outcomes and the organization's ability to modify and improve services.
6. Describe the methods for measuring the outcomes (e.g., agency records, pre-test/post-test data, surveys, et cetera).

### **IV. Capacity to Achieve Results**

Attach answers not to exceed one (1) page for the following questions:

1. Provide the number of staff, position titles, and experience of staff to implement the project. Discuss the agency's current personnel situation (e.g. vacancies, turnover) related to the proposed project.
2. Has the agency provided the type of service proposed in the application? Discuss the successes and challenges of providing this service.
3. Does the agency have any unique or innovative service delivery methods that set it apart from other service providers? Please explain.
4. Describe the agency's overall track record of accomplishing goals in a timely manner and of completing projects.

### **V. Leverage**

Attach answers not to exceed one (1) page for the following questions:

1. Describe the applicant's efforts to obtain funding for this project from other agencies.
2. Explain how funding for this project has been leveraged. Include all resources that have been committed to this project (*project leverage, not agency leverage*).
3. Describe non-monetary resources, such as in-kind donations and volunteers that have been leveraged for this project.

4. Describe any collaboration with other organizations that directly impacts the proposed project.
5. Explain how the proposed services are coordinated with existing services, resulting in a more efficient or cost effective method of service delivery.
6. Describe applicant's collaborating efforts with City departments or programs. Be specific about the nature of the collaboration.
7. Complete the Resource Table **(Form G)**. The resource table will be used to demonstrate what other project specific funding the agency has secured or is in the process of securing. It will also demonstrate the applicant's ability to secure a diverse set of funding opportunities. Do not include this grant request in the resource table. Total funds on the resource table should match the "other funds" total on the Budget form **(Form E)**.

Leverage (cash match) may include the documented cash value of donated or subsidized rent or utilities, but may not include other in-kind donations. If the resource table includes the cash value of donated or subsidized rent or utilities, the applicant must attach the appropriate documentation to this application. For donated or subsidized rent, the required documentation is a letter from the landlord indicating the fair market value of the property being rented. For donated or subsidized utilities, the required documentation is a copy of the utility bill for the property in question. This documentation must be submitted at the time of application in order for rent or utilities to be included in the resource table.

## FORM D - Work Plan

**Project Title:**

**Agency:**

**PROGRAM COMPONENTS**

**2005-2006 Units of Service Per Quarter**

1                      2                      3                      4

**Unduplicated Participants**

Total Program

--	--	--	--

Total HNVF Grant

--	--	--	--

**LONG-TERM OUTCOMES/PERFORMANCE MEASURES/ACTIVITIES**

**LONG-TERM OUTCOME #1:** *Select from page 4 and insert here.*

**A) Performance Measure(s)**

First Performance Measure: *Describe here*

N/A	%	N/A	%
-----	---	-----	---

Second Performance Measure: *Describe here*

N/A	%	N/A	%
-----	---	-----	---

**B) Measurement Methodology**

1. Describe/List Here

**C) Activity 1:** *Insert name of activity here*

Number of Sessions

--	--	--	--

Number of Participants

--	--	--	--

**D) Activity 2:** *Insert name of activity here*

Number of Sessions

--	--	--	--

Number of Participants

--	--	--	--

**LONG-TERM OUTCOME #2:** *Select from page 4 and insert here.*

**A) Performance Measure(s)**

First Performance Measure: *Describe here*

N/A	%	N/A	%
-----	---	-----	---

Second Performance Measure: *Describe here*

N/A	%	N/A	%
-----	---	-----	---

**B) Measurement Methodology**

1. Describe/List Here

**C) Activity 1:** *Insert name of activity here*

Number of Sessions

--	--	--	--

Number of Participants

--	--	--	--

**D) Activity 2:** *Insert name of activity here*

Number of Sessions

--	--	--	--

Number of Participants

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## FORM E – Budget

<b>PROPOSED OPERATING EXPENSES</b>	<b>Total HNPF Grant Request</b> <b>COL 1 (SUM OF COL 2-6)</b>	(Breakdown of Total HNPF Request) <b>Budget for Activity 1</b> <b>COL 2</b>	(Breakdown of Total HNPF Request) <b>Budget for Activity 2</b> <b>COL 3</b>	(Breakdown of Total HNPF Request) <b>Budget for Activity 3</b> <b>COL 4</b>	(Breakdown of Total HNPF Request) <b>Budget for Activity 3</b> <b>COL 5</b>	(Breakdown of Total HNPF Request) <b>Budget for Activity 3</b> <b>COL 6</b>	<b>Other Funds (Leverage)</b> <b>COL 7</b>	<b>Total Project Cost (COL 1 + COL 7)</b>
Personnel Services								
Fringe Benefits								
Supplies								
Communication								
Printing								
Utilities								
Occupancy								
Travel								
Insurance								
Equipment Rental								
Equipment Purchase								
Contract Services								
Audit								
Other (Specify)								
OTHER (SPECIFY)								
Overhead								
<b>Total Operating Expenses</b>								

See page 24 for more detailed instruction on completing the Budget.

## FORM F – Budget Narrative

### Personnel Costs

Budget Line Item	Description/Explanation
<i>Examples:</i>	
<i>Program Manager (.50 FTE)</i>	<i>20 hr/week dedicated to program. Oversees total program productivity and activity implementation.</i>
<i>Program Specialist (1.0 FTE)</i>	<i>Full time dedicated position, organizing all activities and program support.</i>

### Operating Costs

Budget Line Item	Description/Explanation
<i>Examples:</i>	
<i>Rent</i>	<i>Classroom space for 3 hours/day including utilities.</i>
<i>Program Supplies</i>	<i>Textbooks, workbooks, and materials necessary to run program.</i>

## FORM G – Resource Table

Source of Funds	Use	Dollar Amount or Other Value *	Level of Commitment

- \* Do not assign a dollar value to in-kind or other non-monetary resources. Instead, quantify or give a brief description (e.g. 20 volunteer hours per week). Donated or subsidized rent or utilities may be assigned a dollar value, providing the appropriate documentation of its cash value accompanies this application.

### Instructions:

List all other funds to be used for this project that have been received or the applicant expects to receive and then list other in-kind resources that will be used to support the project. In the last column on the right, provide the level of commitment for all resources, using one the following terms: received, projected, and pending. Do not include this grant request on the resource table. The total funds on the resource table should match the “other funds” total on the budget attachment.

### Level of Commitment Definitions:

**Received:** Funds on hand or a firm commitment for funding (requires an agreement or letter confirming funding).

**Projected:** Anticipated renewal of existing funding or a realistic projection of fees, donations, and other revenues based on prior year actuals.

**Pending:** Funds have been applied for and are likely to be received. (NOTE: only include amounts that the agency reasonably expects to receive.)

Cash match may include the documented cash value of donated or subsidized rent or utilities, but may not include other in-kind donations. If the resource table includes the cash value of donated or subsidized rent or utilities, the applicant must attach the appropriate documentation to this application. For donated or subsidized rent, the required documentation is a letter from the landlord indicating the fair market value of the property being rented. For donated or subsidized utilities, the required documentation is a copy of the utility bill for the property in question. This documentation must be submitted at the time of application in order for rent or utilities to be included in the resource table.

## FORM H – Certification and Assurances

THE APPLICANT SHALL PROVIDE THE SERVICES/FACILITIES PROPOSED IN ACCORDANCE WITH THE CITY'S 2005-2006 HEALTHY NEIGHBORHOODS VENTURE FUND PROGRAM. THE APPLICANT MAKES THE FOLLOWING ASSURANCES. THE PROJECT SHALL:

1. BE IN COMPLIANCE WITH ALL LOCAL LAWS, ORDINANCES, CODES, REGULATIONS AND DECREES;
2. PRACTICE NON-DISCRIMINATION IN PROVIDING SERVICES, HIRING PERSONNEL, AND RECRUITING VOLUNTEERS, AND SHALL PROVIDE A PERSONNEL PRACTICES PLAN IF FUNDED;
3. MAINTAIN ADEQUATE CLIENT RECORDS OF INDIVIDUALS BEING SERVED BY THE PROJECT TO DOCUMENT CLIENT NAME, ADDRESS, AGE, INCOME ELIGIBILITY, ETHNICITY, FEMALE HEAD OF HOUSEHOLD, OR ANY OTHER STATISTICAL DATA REQUIRED BY CITY UNLESS SPECIFICALLY EXEMPTED FROM KEEPING SUCH DATA. EXEMPTIONS FROM CITY MUST BE IN WRITING. THE CITY SHALL HAVE FULL AND COMPLETE ACCESS TO SUCH CLIENT RECORDS;
4. SUBMIT IN A TIMELY MANNER SUCH PROGRAM AND FINANCIAL REPORTS AS ARE REQUIRED BY THE CITY TO MONITOR PERFORMANCE OF THE PROJECT;
5. APPOINT ONE DIRECTOR OF THE PROJECT WHO WILL BE RESPONSIBLE FOR THE ADMINISTRATION OF THE PROJECT;
6. APPOINT A FISCAL AGENT WHO SHALL BE RESPONSIBLE FOR ALL FINANCIAL AND ACCOUNTING ACTIVITIES OF THE PROJECT;
7. PREPARE AND SUBMIT FOR CITY APPROVAL A COST ALLOCATION PLAN THAT EQUITABLY APPORTIONS INDIRECT COSTS OVER ALL FUNDING SOURCES SUPPORTING THE PROJECT;
8. APPLICANT UNDERSTANDS THAT THE PROJECT WILL NOT BEGIN, NOR CAN COSTS BE INCURRED, UNTIL PROOF OF ADEQUATE INSURANCE IS APPROVED BY CITY; AND
9. COMPLY WITH CHURCH/STATE RESTRICTION AS OUTLINED BELOW.  
CONTRACTOR AGREES THAT FUNDS RECEIVED FROM THE CITY FOR PUBLIC SERVICES SHALL BE USED IN ACCORDANCE WITH THE FOLLOWING CONDITIONS:
  - (A) CONTRACTOR SHALL NOT DISCRIMINATE AGAINST ANY EMPLOYEE OR APPLICANT FOR EMPLOYMENT ON THE BASIS OF RELIGION AND SHALL NOT LIMIT EMPLOYMENT OR GIVE PREFERENCE IN EMPLOYMENT TO PERSONS ON THE BASIS OF RELIGION;
  - (B) CONTRACTOR SHALL NOT DISCRIMINATE AGAINST ANY PERSON APPLYING FOR PUBLIC SERVICES ON THE BASIS OF RELIGION AND SHALL NOT LIMIT



SUCH SERVICES OR GIVE PREFERENCE TO PERSONS ON THE BASIS OF RELIGION;

- (C) CONTRACTOR SHALL PROVIDE NO RELIGIOUS INSTRUCTION OR COUNSELING, CONDUCT NO RELIGIOUS WORSHIP OR SERVICES, ENGAGE IN NO RELIGIOUS PROSELYTIZING, AND EXERT NO OTHER RELIGIOUS INFLUENCE IN THE PROVISION OF PUBLIC SERVICES;
- (D) THE PORTION OF A FACILITY USED TO PROVIDE PUBLIC SERVICES SHALL CONTAIN NO SECTARIAN OR RELIGIOUS SYMBOLS OR DECORATIONS; AND
- (E) THE FUNDS SHALL NOT BE USED TO CONSTRUCT, REHABILITATE OR RESTORE ANY FACILITY, WHICH IS OWNED BY CONTRACTOR AND IN WHICH THE PUBLIC SERVICES ARE TO BE PROVIDED. MINOR REPAIRS MAY BE MADE, HOWEVER, IF THOSE REPAIRS (1) ARE DIRECTLY RELATED TO THE PUBLIC SERVICES, (2) ARE LOCATED IN A STRUCTURE USED EXCLUSIVELY FOR NON-RELIGIOUS PURPOSES, AND (3) CONSTITUTE IN DOLLAR TERMS ONLY A MINOR PORTION OF THE EXPENDITURE FOR THE PUBLIC SERVICES.

THIS APPLICATION AND THE INFORMATION CONTAINED HEREIN ARE TRUE AND CORRECT AND COMPLETE, TO THE BEST OF MY KNOWLEDGE.

DATE: \_\_\_\_\_

\_\_\_\_\_  
Organization Legal Name

BY: \_\_\_\_\_  
Authorized Representative  
(Signature, Title)

\_\_\_\_\_  
Print Name of Authorized  
Representative Here

\_\_\_\_\_  
Address of Representative

\_\_\_\_\_  
Telephone Number of Representative

## FORM I – Statement of Fiscal Agent Responsibilities

\_\_\_\_\_ shall act as a Fiscal Agent for  
(Agency)  
\_\_\_\_\_ for its  
(Applicant)  
\_\_\_\_\_. The applicant has or will submit  
(Applicant's Project)

a grant application for the City of San José's Healthy Neighborhoods Venture Fund Program.

If the project is awarded funds, the Fiscal Agent shall accept the following responsibilities:

- Enter into an agreement with the City of San José to provide specified services or engage in certain construction-related activities for the project in accordance with any HNMF funding condition(s).
- Submit requests for reimbursement of project expenses to the City of San José on behalf of the applicant.
- Receive payments from the City of San José for project expenses and disburse funds to the applicant upon proper documentation.
- Maintain adequate accounting records for the HNMF-funded project.
- Submit project reports to the City of San José as required.

DATE: \_\_\_\_\_  
Fiscal Agent (Organization Name)  
PLEASE TYPE

BY: \_\_\_\_\_  
Fiscal Agent (Authorized Representative)      Fiscal Agent (Authorized Representative)  
SIGNATURE and TITLE                                      PRINT NAME

\_\_\_\_\_  
Address of Fiscal Agent's Authorized Representative

\_\_\_\_\_  
Phone Number of Fiscal Agent's Authorized Representative